

**DEPARTMENT OF HEALTH SERVICES  
WATER SUPPLY PERMIT  
ENVIRONMENTAL INFORMATION FORM  
FOR CEQA EXEMPTIONS<sup>1</sup>**

*(To be completed by public agencies only, acting as, or on behalf of, water supply permit applicants)*

**GENERAL INFORMATION**

1. Name of project: \_\_\_\_\_
2. Water System number: \_\_\_\_\_ ☐ New Permit: \_\_\_\_\_ : ☐ Permit Amendment
3. Name of applicant/water system: \_\_\_\_\_
4. Name of contact person for this project: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**PROJECT DESCRIPTION** *(fill in blanks or provide attachment, e.g., application description)*

5. Project location (give description of the precise location and boundaries and attach a detailed location map): \_\_\_\_\_  
\_\_\_\_\_
6. Water Supply (indicate whether new, modifications, removals, or replacements):
  - a. Groundwater (well capacity, depth, and enclosing structures): \_\_\_\_\_  
\_\_\_\_\_
  - b. Surface water (source, diversion structures, etc): \_\_\_\_\_  
\_\_\_\_\_
  - c. Connections with other systems: \_\_\_\_\_
  - d. Emergency connection: \_\_\_\_\_
7. Facilities (indicate whether they are new, modifications, removals, or replacements.)
  - a. Treatment facilities (give size, capacity, and enclosing structures): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  - b. Storage facilities
    - (1) Tanks (physical dimensions, new locations, and capacity): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
<sup>1</sup> Not for use with SDWSRF projects

- (2) Open reservoirs (surface area and capacity): \_\_\_\_\_  
 \_\_\_\_\_
- (3) Transmission facilities (give size of pumps and size and length of pipelines): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- c. Distribution facilities (give size of pumps and size and length of mains): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- d. Appurtenant structures (list dimensions of any new structures and their purpose): \_\_\_\_\_  
 \_\_\_\_\_
- e. Parking facilities: \_\_\_\_\_
- f. Access roads: \_\_\_\_\_
- g. Staging areas: \_\_\_\_\_
8. Describe any grading or excavation work, and any planned measures to restore area: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
9. Check the appropriate box below.  
☐ Construction completed  
☐ Construction in progress: Completion date \_\_\_\_\_  
☐ Construction not started: Start date \_\_\_\_\_ Completion date \_\_\_\_\_

***REASONS WHY THE PROJECT IS CONSIDERED EXEMPT***

**Check appropriate box(es)**

1. CCR, Title 22, Section 60101 Specific Activities Within Categorical Exemption Classes.
- (a) Class 1: Existing Facilities
- (1) Addition, deletion, or modification of:
- ☐ Mechanical controls for:
    - \* ☐ Water treatment units
    - \* ☐ Water supply systems
    - \* ☐ Pump station building.
  - ☐ Electrical controls for:
    - \* ☐ Water treatment units
    - \* ☐ Water supply systems
    - \* ☐ Pump station building.

- ☐ Hydraulic controls for:
  - \* ☐ Water treatment units
  - \* ☐ Water supply systems
  - \* ☐ Pump station building.
- (2) Maintenance, repair, replacement, or reconstruction to any water treatment process units, including:
  - ☐ Structures.
  - ☐ Filters
  - ☐ Pumps
  - ☐ Chlorinators
- (b) Class 2: Replacement or Reconstruction.
  - (1) Repair or replacement of:
    - ☐ Water service connections
    - ☐ Meters
    - ☐ Valves for:
      - \* ☐ Backflow prevention
      - \* ☐ Air release
      - \* ☐ Pressure regulating
      - \* ☐ Shut-off
      - \* ☐ Blow-off
      - \* ☐ Flushing.
  - (2) Replacement or reconstruction of:
    - ☐ Existing water supply distribution lines **of substantially the same size**. Describe any size increase or location change: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
    - ☐ Storage tanks and reservoirs **of substantially the same size**. Describe any size increase or location change: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
  - (3) Replacement or reconstruction of:
    - ☐ Water wells **of substantially the same capacity**. Describe any capacity increase or location change: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
    - ☐ Pump stations and related appurtenances **of substantially the same capacity**. Describe any capacity increase or location change: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- (c) Class 3: New Construction of Small Structures:
- (1) ☐ Construction of water supply and distribution lines of less than sixteen inches in diameter, and related appurtenances.
  - (2) ☐ Construction of any water storage tanks and reservoirs of less than 100,000-gallon capacity.
- (d) Class 4: Minor Alterations to land.
- (1) ☐ Minor alterations to land, water or vegetation on any officially existing designated wildlife management areas or fish production facilities for the purpose of reducing the environmental potential for nuisances or vector production.
  - (2) ☐ Any minor alterations to highway crossing for water supply and distribution lines.
2. CCR, Title 14 (CEQA Guidelines).
- ☐ Section 15269 (a) statutory exemption for declared emergencies
  - ☐ Section 15269 (b) statutory exemption for emergency repairs
  - ☐ Section 15269 (c) statutory exemption for emergency prevention/mitigation
  - ☐ Section 15282 (l) statutory exemption for right of way pipelines of less than 1 mile
  - ☐ Section 15282 (n) statutory exemption for water fluoridation
- ☐ Other (list specific code reference) \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

## EXCEPTIONS

- A. Location in an area of Critical Concern (For Categorical Exemption Classes 3, 4, 5, 6, and II):** Could the project result in impacts with regards to an environmental resource of hazardous or critical concern where designated, precisely mapped and officially adopted pursuant to law by federal, state, or local agencies? Discuss below all items checked yes (attach additional sheets as necessary). Some items are repeated under the Federal Crosscutters Section and may be referenced here if applicable.

	Yes	No	
1.	<input type="checkbox"/>	<input type="checkbox"/>	Special status species.
2.	<input type="checkbox"/>	<input type="checkbox"/>	Critical habitat (for special status species)
3.	<input type="checkbox"/>	<input type="checkbox"/>	Unique habitat (e.g., wildlife refuge, deer wintering range, etc.).
4.	<input type="checkbox"/>	<input type="checkbox"/>	Important farmland
5.	<input type="checkbox"/>	<input type="checkbox"/>	Wetlands
6.	<input type="checkbox"/>	<input type="checkbox"/>	Wild and scenic rivers
7.	<input type="checkbox"/>	<input type="checkbox"/>	Officially designated scenic area
8.	<input type="checkbox"/>	<input type="checkbox"/>	Archeological sites.
9.	<input type="checkbox"/>	<input type="checkbox"/>	Floodplains
10.	<input type="checkbox"/>	<input type="checkbox"/>	Areas of hazardous concern
11.	<input type="checkbox"/>	<input type="checkbox"/>	Other _____

Discussion: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**B. Unusual Circumstances (For All Categorical Exemptions):** Evaluate the following elements to determine if there are any unusual circumstances. For any “Yes” answers, discuss the possibility of significant environmental impact resulting from the unusual circumstance. Consider all facilities; conveyance lines; storage, points of diversion; staging areas; and affected service area as applicable. Use attachments if necessary.

- |     | Yes                      | No                       |  |
|-----|--------------------------|--------------------------|--|
| 1.  | <input type="checkbox"/> | <input type="checkbox"/> | In or adjacent to an area of undisturbed, unique, or high-quality habitat.   |
| 2.  | <input type="checkbox"/> | <input type="checkbox"/> | On or adjacent to wildlife migration routes.   |
| 3.  | <input type="checkbox"/> | <input type="checkbox"/> | In an area of unique recreational facilities or resources.   |
| 4.  | <input type="checkbox"/> | <input type="checkbox"/> | On or adjacent to a unique stream or water body.   |
| 5.  | <input type="checkbox"/> | <input type="checkbox"/> | Involves removal of mature, scenic trees (see class 4).  |
| 6.  | <input type="checkbox"/> | <input type="checkbox"/> | Involves grading in a waterway or wetland (see class 4).   |
| 7.  | <input type="checkbox"/> | <input type="checkbox"/> | Involves a substantial alteration of ground contours.  |
| 8.  | <input type="checkbox"/> | <input type="checkbox"/> | Involves new or increased use of a critically depleted groundwater basin or groundwater basin subject to salinity intrusion. |
| 9.  | <input type="checkbox"/> | <input type="checkbox"/> | In an area with important mineral resources.   |
| 10. | <input type="checkbox"/> | <input type="checkbox"/> | Involves production of significant amounts of solid wastes or litter.  |
| 11. | <input type="checkbox"/> | <input type="checkbox"/> | Involves substantial new or increased emission of dust, ash, smoke, fumes, odors, or other pollutants.                       |
| 12. | <input type="checkbox"/> | <input type="checkbox"/> | Involves substantial change in noise or vibration levels in vicinity (beyond the property line).                             |
| 13. | <input type="checkbox"/> | <input type="checkbox"/> | In an area of sensitive noise receptors.   |
| 14. | <input type="checkbox"/> | <input type="checkbox"/> | On slopes of 10 percent or more or on highly erodable soil.  |
| 15. | <input type="checkbox"/> | <input type="checkbox"/> | In an officially mapped area of severe geologic hazard (see class 4)   |
| 16. | <input type="checkbox"/> | <input type="checkbox"/> | Involves new or increased use or disposal of hazardous materials, flammables, or explosives.                                 |
| 17. | <input type="checkbox"/> | <input type="checkbox"/> | Involves substantial change in demand for municipal services.  |
| 18. | <input type="checkbox"/> | <input type="checkbox"/> | Involves traffic impacts in an area with traffic problems.   |
| 19. | <input type="checkbox"/> | <input type="checkbox"/> | Involves substantial increase in fuel consumption (electricity, oil, natural gas, etc.).                                     |

Discussion: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**C. Cumulative Impacts for All Categorical Exemptions**

- |    | Yes                      | No                       |  |
|----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Does the project involve cumulative impacts associated with successive projects of the same type in the same place? If yes, discuss the significance of the impacts. |

Discussion: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. Scenic Highways (For All Categorical Exemptions): Will the project result in damage to any of the following scenic resources within view of a highway officially designated as a state scenic highway (excluding improvements required as mitigation by an adopted Negative Declaration or certified EIR)**

- |    | Yes                      | No                       |                         |
|----|--------------------------|--------------------------|-------------------------|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Trees                   |
| 2. | <input type="checkbox"/> | <input type="checkbox"/> | Historic buildings      |
| 3. | <input type="checkbox"/> | <input type="checkbox"/> | Rock outcroppings       |
| 4. | <input type="checkbox"/> | <input type="checkbox"/> | Other similar resources |

**E. Hazardous Waste Sites (For All Categorical Exemptions)**

- |    | Yes                      | No                       |  |
|----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Is the project located on a site that is included on any list compiled pursuant to Section 65962.5 of the Government Code? |

**F. Historical Resources (For All Categorical Exemptions)**

- |    | Yes                      | No                       |  |
|----|--------------------------|--------------------------|--|
| 1. | <input type="checkbox"/> | <input type="checkbox"/> | Is there a potential for the project to cause a substantial adverse change in the significance of a historical resource? |

Basis for determination: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CERTIFICATION**

I hereby certify that the statements furnished above and in the attached exhibits present the data and information required for this initial evaluation to the best of my ability, and that the facts, statements, and information presented are true and correct to the best of my knowledge and belief.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_